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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Matter of the Application of: Longinos De Dios Martin

Serial No.: 10/717,077

Filed: 11/19/2003

For: **Cable Terminating Apparatus and Method**

Examiner: Ross N. Gushi

Group Art Unit: 2833

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Commissioner for Patents

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JoAnn F. Dillaway  
JoAnn F. Dillaway

**AMENDMENT UNDER 37 CFR 1.312**

Sir:

A Notice of Allowance was mailed on August 18, 2004 in the subject application. Since issuance of the Notice of Allowance an error in antecedent basis has been found in the allowed claims. Applicant respectfully requests entry of the following amendment for the reasons presented herein:

AUG 3 0 2004

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

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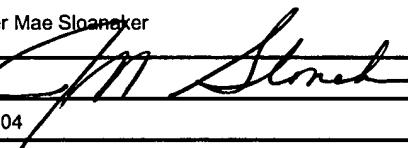
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		Application Number	10/717,077
		Filing Date	11/19/2003
		First Named Inventor	Longinos De Dios Martin
		Art Unit	2833
		Examiner Name	Ross N. Gushi
Total Number of Pages in This Submission	8	Attorney Docket Number	21334-1286

**ENCLOSURES (Check all that apply)**

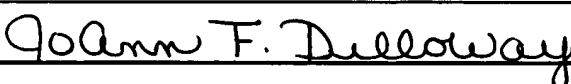
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply (312)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Acknowledgement Card
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Jennifer Mae Sloanecker	
Signature		
Date	8/26/2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

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Typed or printed name	JoAnn F. Dillaway	
Signature		Date 8/26/2004

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